



**MONTANA**  
**EFFECTIVE FINANCING STATEMENT AMENDMENT FORM**  
**EFS AMENDMENT FEE – SEE BELOW**

At least a 10-point font is required when completing form.

For Filing

- Amending a lien containing Agricultural Farm Products use this form.
- Amending a lien containing Agricultural collateral (machinery, equipment) use the national amendment form.

Prepaid Account # \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Montana Original Filing Number \_\_\_\_\_ Original Filing Date \_\_\_\_\_ This filing number is being amended as reflected below.

**1. Original Debtor's Exact Full "Legal" Name** – insert debtor name that appears on Montana Secretary of State records.

or	1a. Organization's Name			
	1b. Individual's Last Name	First Name	Middle Name	Suffix

1c. Debtor's Signature

**2. Original Secured Party's Name** - insert secured party name that appears on Montana Secretary of State records.

or	2a. Organization's Name			
	2b. Individual's Last Name	First Name	Middle Name	Suffix

2c. Secured Party's Signature

**3. Updated Debtor Information** – insert only one debtor (3a or 3b)-do not abbreviate or combine names and use exact legal name of debtor.

or	3a. Organization's Name			
	3b. Individual's Last Name	First Name	Middle Name	Suffix

3c. Mailing Address	City	State	Postal Code	Country
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3d. SSN or Tax ID #

3e. Debtor's Signature

**4. Updated Secured Party Information** – insert only one secured party name (4a or 4b)-do not abbreviate or combine names and use exact legal name of secured party.

or	4a. Organization's Name			
	4b. Individual's Last Name	First Name	Middle Name	Suffix

4c. Mailing Address	City	State	Postal Code	Country
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**Amendment Types** – Multiple amendment types may be selected except for a termination.

<input type="checkbox"/> <b>Continuation (\$5.00)</b> Continues expiration of filing. Filed no more than six months prior to the expiration date. <b>Must be signed by the secured party.</b>	<input type="checkbox"/> <b>Termination (No Fee)</b> The secured party no longer claims a security interest. <b>Must be signed by the secured party</b>	<input type="checkbox"/> <b>Full Assignment (\$5.00)</b> The secured party's rights to the property described below have been assigned to the assignee whose name and address are listed above. <b>Must be signed by the secured party.</b>	<input type="checkbox"/> <b>Add Debtor</b> <input type="checkbox"/> <b>Change Debtor</b> <input type="checkbox"/> <b>Delete Debtor</b> <b>(All of above \$5.00)</b> Amending the debtor as stated above. <b>Must be signed by both the debtor and secured party.</b>
<input type="checkbox"/> <b>Add Secured Party</b> <input type="checkbox"/> <b>Change Secured Party</b> <input type="checkbox"/> <b>Delete Secured Party</b> <b>(All of above \$5.00)</b> Amending the secured party as stated above. <b>Must be signed by the secured party.</b>	<input type="checkbox"/> <b>Add Collateral</b> <input type="checkbox"/> <b>Change Collateral</b> <input type="checkbox"/> <b>Delete Collateral</b> <b>(All of above \$5.00)</b> Amending the collateral as stated below. <b>Must be signed by both the debtor and secured party.</b>	<input type="checkbox"/> <b>Partial Release (\$5.00)</b> Releasing the collateral stated below. <b>Must be signed by both the debtor and secured party.</b>	<input type="checkbox"/> <b>Partial Assignment (\$5.00)</b> The secured party's rights to the property described below have been assigned to the assignee whose name and address are listed above. <b>Must be signed by the secured party.</b>

**Updated Farm Products**

Specific Farm Product	Crop Year	Montana County	Farm Product Quantity/Description

## Instructions For Completing EFS Amendment Form

**PLEASE TYPE THIS FORM:** Verify all information on the form for accuracy and correct spelling. Any error in the new debtor's name, social security number, taxpayer Id number, organization information, will result in incorrect or incomplete information. At least a 10-point font must be used when completing the form.

**MONTANA ORIGINAL FILING NUMBER:** You must list the original filing number. Be sure to check the number for accuracy. Please do not reflect the filing number for an amendment on this form. Only one filing number per form is allowed.

**ORIGINAL FILING DATE:** Reflect the date the original lien was recorded with our office.

**ORIGINAL DEBTOR/SECURED PARTY NAME: (1a or b, 2a or b)** List the current debtor and secured party name as it appears on our records. This is to insure we are amending the correct filing. We require only one debtor and secured party name. Address information is not required.

**UPDATED DEBTOR/SECURED PARTY NAME (3a or b, 4a or b):** These fields are used when adding, changing or deleting a party's name, address, social security or tax ID number. You can list either an individual name or an organization name for the debtor and secured party. But you cannot list both for either party.

**TAX ID NUMBER (3d):** Is required for each individual debtor, and the debtor's internal revenue service (IRS) employer identification number is required for each business, corporation, trade name, D/b/a etc., listed.

**PARTY SIGNATURES (1c, 2c, 3e):** When adding a new debtor that debtor must sign. In all other cases the current debtor and secured party must sign the amendment form or the amended information will not appear on the Farm Bill Master List. In some cases only the secured party's signature is required please review the amendment types to determine the correct party signatures required.

**AMENDMENT TYPES:** Check the appropriate box for the amendment you are performing. Multiple amendments may be selected with the exception of a termination statement.

**UPDATED FARM PRODUCT:** These fields are used when adding, changing or deleting a farm product. Note: You must list the specific farm product such as wheat, barley, hay, cattle, horses, pigs. The listing all "livestock and crops" will not suffice.

**CROP YEAR:** For a crop grown in soil, list the calendar year in which it is harvested or to be harvested. For animals, list the calendar year in which they are born or acquired. For poultry and eggs, list the calendar year in which they are sold or to be sold. If "year" is left blank, perfection continues for every year the statement is effective.

**COUNTY:** Where the farm product is produced and/or located.

**QUANTITY/DESCRIPTION:** Number of bushels, head of livestock, or other commonly used identifier. Specify the units. Example: 300 bushels of winter wheat stored in bin 12. If "quantity/description" is left blank, then all specific farm products owned by the debtor are covered.

**SUBMIT:** The completed and properly signed EFS Amendment with the proper filing fee. At the time of filing, the filing officer will return a system generated acknowledgement letter. Please submit only the original.

**ACKNOWLEDGMENT LETTER:** Verify all information on the acknowledgement letter for accuracy and correct spelling. Any error will result in incorrect or incomplete information. To correct an error call (406) 444-2468.

**EFS AMENDMENT FEE:** See each amendment type for the specific filing fee.

**PREPAID ACCOUNT:** Agencies may set up an account with the Secretary of State to pre-pay filing fees. For information please contact the Management Services Bureau of the Office of the Secretary of State at (406) 444-2035.

**MAILING ADDRESS:** Secretary of State, Attn: UCC, 1236 East 6<sup>th</sup> Avenue, Helena, Montana 59601 or PO Box 202801, Helena, MT. 59620-2801.